Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF OHIO		
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this is an amended filing

### Official Form 101

# Voluntary Petition for Individuals Filing for Bankruptcy

04/20

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1: Identify Yourself			
		About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name			
	Write the name that is on	Shawne		
	your government-issued picture identification (for	First name		First name
	example, your driver's	Nacole		
	license or passport).	Middle name		Middle name
	Bring your picture identification to your meeting with the trustee.	Mack Last name and Suffix (Sr., Jr., II, III)	_	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years	<b>.</b>		
	Include your married or maiden names.			
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-2546		

Official Form 101

	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs.  Business name(s)  EIN	☐ I have not used any business name or EINs.  Business name(s)  EIN
Where you live	361 S. Miller Road	If Debtor 2 lives at a different address:
	Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
	Summit	
	County	County
	If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
	Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
Why you are choosing this district to file for bankruptcy	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)
	Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names  Where you live  Why you are choosing this district to file for	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names  Business name(s)  EIN  Where you live  361 S. Miller Road Fairlawn, OH 44333 Number, Street, City, State & ZIP Code  Summit  County  If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.  Number, P.O. Box, Street, City, State & ZIP Code  Why you are choosing this district to file for bankruptcy  Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.

Deb	tor 1 Shawne Nacole M	ack			Case number (if known)			
ar	Report About Any Bu	sinesses	You Own	as a Sole Proprieto	or			
2.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.				
		☐ Yes.	Name	and location of busin	ness			
	A sole proprietorship is a		News					
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			of business, if any				
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	er, Street, City, State	e & ZIP Code			
	it to this petition.		Check	the appropriate box	to describe your business:			
				Health Care Busine	ess (as defined in 11 U.S.C. § 101(27A))			
				Single Asset Real I	Estate (as defined in 11 U.S.C. § 101(51B))			
				Stockbroker (as de	fined in 11 U.S.C. § 101(53A))			
				Commodity Broker	(as defined in 11 U.S.C. § 101(6))			
				None of the above				
If you are filing under Chapter 11, the court must know whether you are a small busine proceed under Subchapter V so that it can set appropriate deadlines. If you indicate the you are choosing to proceed under Subchapter V, you must attach your most recent be cash-flow statement, and federal income tax return or if any of these documents do not statement by 11 U.S.C. § 1182(1)?			can set appropriate deadlines. If you indicate that you are a small business debtor or					
	For a definition of small	■ No.	I am r	ot filing under Chapt	er 11.			
	business debtor, see 11 U.S.C. § 101(51D).	□ No.		I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.				
		☐ Yes.	I am fi I do n	I am filing under Chapter 11, I am a small business debtor according to the definition in the Bankruptcy Code, and I do not choose to proceed under Subchapter V of Chapter 11.				
		☐ Yes.			1, I am a debtor according to the definition in § 1182(1) of the Bankruptcy Code, and I Subchapter V of Chapter 11.			
Par	Report if You Own or	Have Any	/ Hazardo	us Property or Any	Property That Needs Immediate Attention			
4.	Do you own or have any	■ No.						
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is	he hazard?				
	public health or safety? Or do you own any property that needs immediate attention?			iate attention is why is it needed?				
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	the property?				
					Number, Street, City, State & Zip Code			

Debtor 1 **Shawne Nacole Mack**  Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

#### 15. Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

#### Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### П

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

#### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Official Form 101

Deb	tor 1 Shawne Nacole M	ack		Case number	(if known)			
art	6: Answer These Quest	ions for Re	eporting Purposes					
16.	What kind of debts do you have?	16a.		sumer debts? Consumer debts are define al, family, or household purpose."	ed in 11 U.S.C. § 101(8) as "incurred by an			
			☐ No. Go to line 16b.					
			Yes. Go to line 17.					
		16b.		ness debts? Business debts are debts the nent or through the operation of the busin				
			☐ No. Go to line 16c.					
			☐ Yes. Go to line 17.					
		16c.	State the type of debts you owe that are not consumer debts or business debts					
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7.	Go to line 18.				
	Do you estimate that after any exempt property is excluded and administrative expenses	■ Yes.	Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative are paid that funds will be available to distribute to unsecured creditors?  No  Yes					
	are paid that funds will be available for distribution to unsecured creditors?							
18.	How many Creditors do you estimate that you owe?	1-49 50-99 100-19 200-99		☐ 1,000-5,000 ☐ 5001-10,000 ☐ 10,001-25,000	☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than100,000			
19.	How much do you estimate your assets to be worth?	<b>\$100,0</b>	50,000 01 - \$100,000 001 - \$500,000 001 - \$1 million	□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion			
20.	How much do you estimate your liabilities to be?	<b>\$100,0</b>	50,000 101 - \$100,000 1001 - \$500,000 1001 - \$1 million	□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	□ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion □ More than \$50 billion			
art	7: Sign Below							
or	you	I have ex	amined this petition, and I declare	e under penalty of perjury that the information	ation provided is true and correct.			
			chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, ates Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.					
				pay or agree to pay someone who is not otice required by 11 U.S.C. § 342(b).	an attorney to help me fill out this			
		I request	relief in accordance with the chap	pter of title 11, United States Code, speci	fied in this petition.			
		bankrupto and 3571	cy case can result in fines up to \$	ncealing property, or obtaining money or 6250,000, or imprisonment for up to 20 ye	property by fraud in connection with a ars, or both. 18 U.S.C. §§ 152, 1341, 1519,			
		Shawne	vne Nacole Mack P Nacole Mack of Debtor 1	Signature of Debtor	2			
		Executed	July 1, 2021 MM / DD / YYYY	Executed on MM /	DD / YYYY			

Debtor 1	Shawne Nacole Mack	Case number (if known)	

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Mary Lo	ou Burns f Attorney for Debtor	Date	July 1, 2021 MM / DD / YYYY
Mary Lou Printed name	Burns 0071363		
Mary Lou Firm name	Burns, Attorney at Law		
484 S. Mill Akron,, Oh			
Contact phone	330-668-6006	Email address	yourfreshstart@hotmail.com
0071363 O			

Fill i	n this informa	ation to identify your	case:			
Debt	or 1	Shawne Nacole M	lack			
Dobt	.o. 0	First Name	Middle Name	Last Name		
Debt (Spou	se if, filing)	First Name	Middle Name	Last Name		
Unite	ed States Bank	kruptcy Court for the:	NORTHERN DISTRICT	OF OHIO		
Case	e number					
(if kno						k if this is an
					amen	ded filing
<b>~</b> "	: -: - 1 🖵	4000				
		m 106Sum	and Lighilities on	nd Cartain Statistical Information		40/45
				nd Certain Statistical Information are filing together, both are equally responsible f		12/15
infor	mation. Fill oເ	it all of your schedule	es first; then complete th	ne information on this form. If you are filing amend		
your	original forms	s, you must fill out a	new <i>Summary</i> and check	k the box at the top of this page.		
Part	1: Summai	rize Your Assets				
					Your a	ssets of what you own
1.	Schedule A/E 1a. Copy line	<b>3: Property</b> (Official Foundation 55, Total real estate, from 55, Total real estate,	orm 106A/B) om Schedule A/B		\$	210,000.00
	1b. Copy line	62, Total personal prop	perty, from Schedule A/B		\$	23,974.03
	1c. Copy line	63, Total of all property	on Schedule A/B		\$	233,974.03
Part	2: Summai	rize Your Liabilities				
						abilities It you owe
2.			aims Secured by Property nn A, Amount of claim, at	(Official Form 106D) the bottom of the last page of Part 1 of <i>Schedule D</i>	\$	215,688.00
3.			Unsecured Claims (Official 1 (priority unsecured claim	l Form 106E/F) is) from line 6e of <i>Schedule E/F</i>	\$	0.00
	3b. Copy the	total claims from Part	2 (nonpriority unsecured c	laims) from line 6j of Schedule E/F	\$	174,329.83
				Your total liabilities	\$	390,017.83
Part	3: Summai	rize Your Income and	Expenses			
4.		our Income (Official Fo		1	\$	3,955.85
5.		our Expenses (Official onthly expenses from li	,		\$	3,988.00
Part	4: Answer	These Questions for	Administrative and Stati	stical Records		
6.			er Chapters 7, 11, or 13? on this part of the form. Cl	heck this box and submit this form to the court with yo	our other sc	hedules.
7.	■ Yes What kind of	debt do you have?				
		•				
				debts are those "incurred by an individual primarily for g for statistical purposes. 28 U.S.C. § 159.	r a personal	, family, or

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

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the court with your other schedules.

Best Case Bankruptcy

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

5,533.65

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total o	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	105,962.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	105,962.00

ebtor 1	Shawne Nac	cole Mack					
	First Name	Middle	e Name	Last Name			
ebtor 2 pouse, if filing)	First Name	Middle	e Name	Last Name			
nited States Bank	truptcy Court for	ine. NORTHER	אופוטאו	ICT OF OHIO			
ase number							
							amended filing
official For	m 106A/E	3					
chedule	A/B: Pi	roperty					12/15
ormation. If more s swer every questic	space is needed, on.	attach a separate sl	heet to this	narried people are filing together, both a s form. On the top of any additional pag Estate You Own or Have an Interest In			
Do you own or hav	e any legal or eq	uitable interest in a	ny resider	nce, building, land, or similar property?	,		
☐ No. Go to Part 2							
Yes. Where is the	•						
— Tes. Where is the	ne property:						
1			What is	s the property? Check all that apply			
<sup>1</sup> <b>361 S. Mille</b>	r Road			s the property? Check all that apply Single-family home	Do not deduct secure	ed claims	s or exemptions. Put
361 S. Mille	r Road available, or other des	scription				cured cl	aims on Schedule D:
361 S. Mille		ecription		Single-family home	the amount of any se	cured cl	
361 S. Mille		scription		Single-family home Duplex or multi-unit building	the amount of any se Creditors Who Have	cured cl Claims	aims on Schedule D: Secured by Property.
361 S. Mille		scription 44333-0000		Single-family home Duplex or multi-unit building Condominium or cooperative	the amount of any se Creditors Who Have	cured cl	aims on Schedule D: Secured by Property.
361 S. Miller Street address, if a	vailable, or other des			Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	the amount of any se Creditors Who Have	cured cl Claims S	aims on Schedule D: Secured by Property.
361 S. Mille Street address, if a	vailable, or other des	44333-0000		Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare	Current value of the entire property? \$210,000.0	cured cl Claims S e C p	aims on Schedule D: Secured by Property. Current value of the portion you own?
361 S. Mille Street address, if a	vailable, or other des	44333-0000		Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Other	Current value of the entire property? \$210,000.0  Describe the nature (such as fee simple	cured cl Claims s	aims on Schedule D: Secured by Property.  Current value of the portion you own? \$210,000.0
361 S. Mille Street address, if a	vailable, or other des	44333-0000	Uho ha	Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Other as an interest in the property? Check one	Current value of the entire property? \$210,000.0  Describe the nature (such as fee simple	cured cl Claims s	aims on Schedule D: Secured by Property.  Current value of the sortion you own? \$210,000.0
361 S. Mille Street address, if a	vailable, or other des	44333-0000	Who ha	Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Other	Current value of the entire property? \$210,000.0  Describe the nature (such as fee simple a life estate), if known	cured cl Claims s	aims on Schedule D: Secured by Property.  Current value of the sortion you own? \$210,000.0
361 S. Miller Street address, if a	vailable, or other des	44333-0000	Who ha	Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Otheras an interest in the property? Check one Debtor 1 only	Current value of the entire property? \$210,000.0  Describe the nature (such as fee simple a life estate), if know Home	cured cl Claims S e C p DO of your , tenance	aims on Schedule D: Secured by Property.  Current value of the cortion you own? \$210,000.0  Townership interest by the entireties, compared to the cortion of the cortion o
361 S. Mille Street address, if a  Fairlawn City  Summit	vailable, or other des	44333-0000	Who ha	Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Other as an interest in the property? Check one Debtor 1 only Debtor 2 only	Current value of the entire property? \$210,000.0  Describe the nature (such as fee simple a life estate), if known	cured cl Claims S e C p DO of your , tenance	aims on Schedule D: Secured by Property.  Current value of the cortion you own? \$210,000.0  Townership interest by the entireties, compared to the cortion of the cortion o
361 S. Mille Street address, if a  Fairlawn City  Summit	vailable, or other des	44333-0000	Who ha	Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Other as an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another information you wish to add about this	Current value of the entire property? \$210,000.0  Describe the nature (such as fee simple a life estate), if know Home  Check if this is (see instructions)	cured cl Claims S e C p DO of your , tenance	aims on Schedule D: Secured by Property.  Current value of the cortion you own? \$210,000.0  Townership interest by the entireties, compared to the cortion of the cortion o
361 S. Mille Street address, if a  Fairlawn City  Summit	vailable, or other des	44333-0000	Who ha	Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Other as an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another information you wish to add about this try identification number:	Current value of the entire property? \$210,000.0  Describe the nature (such as fee simple a life estate), if known Home  Check if this is (see instructions)	cured cl Claims S e C p DO of your , tenanc wn.	aims on Schedule D: Secured by Property.  Current value of the cortion you own? \$210,000.0  Townership interest by by the entireties, continuity property
361 S. Mille Street address, if a  Fairlawn City  Summit	vailable, or other des	44333-0000	Who ha	Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Other as an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another information you wish to add about this ty identification number: tted in the City of Akron, Count on as being Lot 45 in Fairlawn in	Current value of the entire property? \$210,000.0  Describe the nature (such as fee simple a life estate), if known Home  Check if this is (see instructions)  item, such as local  y of Summit and Steights Estates No.	cured cl Claims S  p 00 of your, tenancy wn.  commu	aims on Schedule D: Secured by Property.  Current value of the cortion you own? \$210,000.0  Townership interest by by the entireties, continuity property  Ohio, and
361 S. Mille Street address, if a  Fairlawn City  Summit	vailable, or other des	44333-0000	Who ha	Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Other as an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another information you wish to add about this ty identification number: ted in the City of Akron, Count on as being Lot 45 in Fairlawn in teded in Plat Book 44, Pages 155	Current value of the entire property? \$210,000.0  Describe the nature (such as fee simple a life estate), if known Home  Check if this is (see instructions)  item, such as local  y of Summit and Steleights Estates No. 9-160 of Summit Co	cured cl Claims S  p 00 of your, tenancy wn.  commu	aims on Schedule D: Secured by Property.  Current value of the cortion you own? \$210,000.0  Townership interest by by the entireties, continuity property  Ohio, and
361 S. Mille Street address, if a  Fairlawn City  Summit	vailable, or other des	44333-0000	Who ha	Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Other as an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another information you wish to add about this ty identification number: tted in the City of Akron, Count on as being Lot 45 in Fairlawn in	Current value of the entire property? \$210,000.0  Describe the nature (such as fee simple a life estate), if known Home  Check if this is (see instructions)  item, such as local  y of Summit and Steleights Estates No. 9-160 of Summit Co	cured cl Claims S  p 00 of your, tenancy wn.  commu	aims on Schedule D: Secured by Property.  Current value of the cortion you own? \$210,000.0  Townership interest by by the entireties, continuity property  Ohio, and
361 S. Mille Street address, if a  Fairlawn City  Summit	vailable, or other des	44333-0000	Who ha	Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Other as an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another information you wish to add about this ty identification number: ted in the City of Akron, Count on as being Lot 45 in Fairlawn in teded in Plat Book 44, Pages 155	Current value of the entire property? \$210,000.0  Describe the nature (such as fee simple a life estate), if known Home  Check if this is (see instructions)  item, such as local  y of Summit and Steleights Estates No. 9-160 of Summit Co	cured cl Claims S  p 00 of your, tenancy wn.  commu	aims on Schedule D: Secured by Property.  Current value of the cortion you own? \$210,000.0  Townership interest by by the entireties, continuity property  Ohio, and

Part 2: Describe Your Vehi

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Deb	tor 1 S	hawne Nac	ole Mack		Case number	(if known)	
3. <b>C</b>	ars, vans,	trucks, tract	ors, sport utility ve	hicles, motorcycles			
п	No						
-	Yes						
2.1	Maka	Ford		Who has an interest in the property? Charles	Do not o	deduct secured cl	aims or exemptions. Put
3.1		Edge		Who has an interest in the property? Check one	the amo	ount of any secure	ed claims on Schedule D:
	Model: Year:	2017		■ Debtor 1 only □ Debtor 2 only			ms Secured by Property.
		nate mileage:	36,714	Debtor 1 and Debtor 2 only		t value of the property?	Current value of the portion you own?
		formation:		☐ At least one of the debtors and another			
						***	400 000 00
				☐ Check if this is community property (see instructions)		\$20,268.00	\$20,268.00
				(655 mendenone)			
<b>■</b> □	No Yes  Add the do	ollar value of	the portion you ow	ntercraft, fishing vessels, snowmobiles, motorcyc	g any entries fo		\$20,268.00
•							
Part	3: Descri	be Your Perso	nal and Household Ite	ems			
Doy	you own o	or have any le	egal or equitable in	terest in any of the following items?		!	Current value of the portion you own?  Do not deduct secured claims or exemptions.
	Examples: I No I Yes. De		Household Goo	, china, kitchenware  ds and Furnishings - Miscellaneous itel I greater than \$500.	ms with no		\$1,000.00
			One item valued	i greater triair \$500.			Ψ.,σσσ.σσ
E		Televisions ar including cell	phones, cameras, m	eo, stereo, and digital equipment; computers, pr nedia players, games	rinters, scanners	; music collection	
			Cell phone, tele	vision		ı	\$1,000.00
E	Examples:	other collection	figurines; paintings, ns, memorabilia, co	prints, or other artwork; books, pictures, or othe llectibles	er art objects; sta	mp, coin, or ba	seball card collections;
E	Examples:	for sports ar Sports, photog musical instru	graphic, exercise, ar	nd other hobby equipment; bicycles, pool tables,	, golf clubs, skis;	; canoes and ka	yaks; carpentry tools;
	■ No ] Yes. De	scribe					
_	Fi <mark>rearms</mark> <i>Examples</i> ■ No	: Pistols, rifles	, shotguns, ammuni	tion, and related equipment			
	■ NO ial Form 10	06A/B		Schedule A/B: Property			page

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Best Case Bankruptcy

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Debt	or 1	Shawne Nac	ole Mack	Cas	e number (if known)	
	Yes.	Describe				
E	lothes Examp		othes, furs, leather coats, designer	wear, shoes, accessories		
		Describe				
			Wearing Apparel - Miscellar greater than \$200.	neous items with no one item va	llued	\$500.00
	No		welry, costume jewelry, engageme	nt rings, wedding rings, heirloom jewelr	ry, watches, gems, gol	d, silver
			Jewelry - Miscellaneous ite than \$400.	ms with no one item valued grea	ater	\$100.00
<i>E</i>	Examp No	rm animals bles: Dogs, cats, b	birds, horses			
	No	ner personal and		ready list, including any health aids	you did not list	
			of all of your entries from Part 3, number here	including any entries for pages you	have attached	\$2,600.00
Part 4	4: Des	scribe Your Financ	cial Assets			
Do y	ou ow	n or have any le	egal or equitable interest in any (	of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
	E <i>xamp</i> No	,,	nave in your wallet, in your home, i	n a safe deposit box, and on hand whe	n you file your petition	
					Cash	\$41.25
E			avings, or other financial accounts; If you have multiple accounts with	certificates of deposit; shares in credit the same institution, list each.	unions, brokerage ho	uses, and other similar
	Yes			Institution name:		
			17.1. Checking	Wells Fargo - #2725 - Estimated	d Balance	\$638.11
E	Ехатр		or publicly traded stocks investment accounts with brokerage	ge firms, money market accounts		
	No Yes		Institution or issuer name	:		

Official Form 106A/B Schedule A/B: Property page 3

De	Snawne i	Nacole Mack	Case number (if known)	
19.	Non-publicly trader joint venture ■ No	d stock and interests in incorp	porated and unincorporated businesses, including an intere	st in an LLC, partnership, and
		c information about them Name of entity:		
20.	Negotiable instrume Non-negotiable inst No	ents include personal checks, ca	gotiable and non-negotiable instruments ashiers' checks, promissory notes, and money orders. ransfer to someone by signing or delivering them.	
21.	Retirement or pens Examples: Interests  No		403(b), thrift savings accounts, or other pension or profit-sharing	g plans
	Yes. List each acc	count separately.  Type of account:	Institution name:	
		401(k)	TriMark Retirement Plan - Balance as of 04/30/2021	\$426.67
22.		nused deposits you have made s	so that you may continue service or use from a company t, public utilities (electric, gas, water), telecommunications compa	nies, or others
	☐ Yes		Institution name or individual:	
23.	Annuities (A contra	act for a periodic payment of mor	ney to you, either for life or for a number of years)	
	☐ Yes	Issuer name and description.		
24.		cation IRA, in an account in a (1), 529A(b), and 529(b)(1).	qualified ABLE program, or under a qualified state tuition pr	ogram.
	☐ Yes	Institution name and description	on. Separately file the records of any interests.11 U.S.C. § 521(c)	):
25.	■ No	or future interests in property (	other than anything listed in line 1), and rights or powers ex	ercisable for your benefit
26.	Patents, copyrights	s, trademarks, trade secrets, a	and other intellectual property eds from royalties and licensing agreements	
		c information about them		
27.	Examples: Building	es, and other general intangib permits, exclusive licenses, coo	oles operative association holdings, liquor licenses, professional licens	ses
	■ No □ Yes. Give specific	c information about them		
M	oney or property ow	red to you?		Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax refunds owed	to you		
	■ No □ Yes. Give specific	c information about them, includi	ng whether you already filed the returns and the tax years	
29.	Family support  Examples: Past due	e or lump sum alimony, spousal	support, child support, maintenance, divorce settlement, propert	y settlement

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Best Case Bankruptcy

Schedule A/B: Property

Official Form 106A/B

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De	ebtor 1	Shawne Nacole	Mack	Case number (if known)	
	☐ Yes.	Give specific informat	iion		
30.	Examp			nts, disability benefits, sick pay, vacation pay, workers' compe ne else	nsation, Social Security
	■ No □ Yes.	Give specific informa	tion		
31.		sts in insurance polic bles: Health, disability		avings account (HSA); credit, homeowner's, or renter's insurar	nce
	■ No				
	☐ Yes.	Name the insurance of	company of each policy an Company name:	d list its value.  Beneficiary:	Surrender or refund value:
32.	If you a		at is due you from somed a living trust, expect proce	one who has died eds from a life insurance policy, or are currently entitled to rec	eive property because
	■ No □ Yes.	Give specific informa	tion		
33.			s, whether or not you have syment disputes, insurance	ve filed a lawsuit or made a demand for payment e claims, or rights to sue	
		Describe each claim.			
34.				nature, including counterclaims of the debtor and rights to	set off claims
•	■ No		,,,,,,,		
	☐ Yes.	Describe each claim.			
35.	Any fin	nancial assets you di	d not already list		
	■ No				
	☐ Yes.	Give specific informa	tion		
36				rt 4, including any entries for pages you have attached	\$1,106.03
Pa	rt 5: De	scribe Any Business-R	elated Property You Own or	Have an Interest In. List any real estate in Part 1.	
37.	Do you o	own or have any legal o	or equitable interest in any b	pusiness-related property?	
- 1	No. Go	to Part 6.			
I	☐ Yes. G	Go to line 38.			
Pa			Commercial Fishing-Related st in farmland, list it in Part 1.	Property You Own or Have an Interest In.	
46.	Do you	ı own or have any le	gal or equitable interest i	in any farm- or commercial fishing-related property?	
	_	Go to Part 7.			
	☐ Yes	. Go to line 47.			
Pa	rt 7:	Describe All Property	/ You Own or Have an Intere	est in That You Did Not List Above	
53.			y of any kind you did not country club membership	already list?	
	Yes.	Give specific informat	iion		
				ty, including tax refund not related to Earned ditional Child Tax Credit	Unknown

Official Form 106A/B Schedule A/B: Property page 5

Debto	or 1 Shawne Nacol	e Mack		Case number (if known)	
		Wages			Unknown
		Tax Refund related to Earned Inc	come Credit and A	Additional Child Tax	Unknown
54. <i>i</i>	Add the dollar value of	all of your entries from Part 7. Write tha	t number here		\$0.00
Part 8	List the Totals of Ea	ch Part of this Form			
55. <b>I</b>	Part 1: Total real estate	, line 2			\$210,000.00
56. I	Part 2: Total vehicles, I	ne 5	\$20,268.00		·
57. I	Part 3: Total personal a	nd household items, line 15	\$2,600.00		
58. <b>I</b>	Part 4: Total financial a	ssets, line 36	\$1,106.03		
59. <b>I</b>	Part 5: Total business-	elated property, line 45	\$0.00		
60. <b>I</b>	Part 6: Total farm- and	fishing-related property, line 52	\$0.00		
61. <b>I</b>	Part 7: Total other prop	erty not listed, line 54 +	\$0.00		
62. <b>-</b>	Total personal property	Add lines 56 through 61	\$23,974.03	Copy personal property total	\$23,974.03
63. <b>-</b>	Total of all property on	Schedule A/B. Add line 55 + line 62			\$233,974.03

Official Form 106A/B Schedule A/B: Property page 6

Fill in this infor	mation to identify your	case:		
Debtor 1	Shawne Nacole M			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF OHIO	
(if known)				☐ Check if this is an amended filing

### Official Form 106C

# Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify 1	the Pro	perty You	Claim as	Exempt
---------	------------	---------	-----------	----------	--------

Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.									
ou are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)									
☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)	ou are claiming federal exemptions. 11 U.S.C. § 522(b)(2)								
For any property you list on Schedule A/B that you claim as exempt, fill in the information below.	property you list on Schedule A/B that you claim as exempt, fill in the information below.								
Brief description of the property and line on Schedule A/B that lists this property Schedule A/B that lists	emption								
Copy the value from Check only one box for each exemption.  Schedule A/B									
361 S. Miller Road Fairlawn, OH 44333 Summit County \$210,000.00	§								
Situated in the City of Akron, County of Summit and State of Ohio, and known as being Lot 45 in Fairlawn Heights Estates No.2 Allotment as recorded in Plat Book 44, Pages 159-160 of Summit County Record Line from Schedule A/B: 1.1									
2017 Ford Edge 36,714 miles Line from Schedule A/B: 3.1  \$20,268.00  \$4,000.00  2329.66(A)(2)	§								
100% of fair market value, up to any applicable statutory limit									

			any applicable statutory limit		
Household Goods and Furnishings - Miscellaneous items with no one	\$1,000.00		\$11,900.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)	
item valued greater than \$500. Line from <i>Schedule A/B</i> : <b>6.1</b>		☐ 100% of fair market value, up to any applicable statutory limit		-0-0.00ξε της τη(α)	
Cell phone, television Line from Schedule A/B: 7.1	\$1,000.00		\$1,000.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)	
			100% of fair market value, up to any applicable statutory limit		

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 1 of 2

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De	btor 1 Shawne Nacole Mack			Case number (if known)	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own		ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Cne	ck only one box for each exemption.	
	Wearing Apparel - Miscellaneous items with no one item valued	\$500.00		\$500.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)
	greater than \$200. Line from <i>Schedule A/B</i> : 11.1			100% of fair market value, up to any applicable statutory limit	(
	Jewelry - Miscellaneous items with no one item valued greater than	\$100.00		\$1,700.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(b)
	<b>\$400.</b> Line from <i>Schedule A/B</i> : <b>12.1</b>			100% of fair market value, up to any applicable statutory limit	, and a way
	Cash Line from Schedule A/B: 16.1	\$41.25		\$41.25	Ohio Rev. Code Ann. § 2329.66(A)(3)
	Ellie Holli Galleddie A.B. 1911			100% of fair market value, up to any applicable statutory limit	2020:00(1)(0)
	Checking: Wells Fargo - #2725 - Estimated Balance	\$638.11		\$458.75	Ohio Rev. Code Ann. § 2329.66(A)(3)
	Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	
	Checking: Wells Fargo - #2725 - Estimated Balance	\$638.11		\$179.36	Ohio Rev. Code Ann. § 2329.66(A)(18)
	Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	2020:00(-1)(1:0)
	401(k): TriMark Retirement Plan - Balance as of 04/30/2021	\$426.67		\$426.67	Ohio Rev. Code Ann. § 2329.66(A)(10)(b)
	Line from Schedule A/B: 21.1			100% of fair market value, up to any applicable statutory limit	2020:00(-1)(10)(0)
	Any personal property, including tax refund not related to Earned Income	Unknown	•	\$1,145.64	Ohio Rev. Code Ann. § 2329.66(A)(18)
	Credit or Additional Child Tax Credit Line from Schedule A/B: 53.1			100% of fair market value, up to any applicable statutory limit	
	Wages Line from Schedule A/B: 53.2	Unknown		75%	Ohio Rev. Code Ann. § 2329.66(A)(13)
				100% of fair market value, up to any applicable statutory limit	
	Tax Refund related to Earned Income Credit and Additional Child Tax	Unknown		100%	Ohio Rev. Code Ann. § 2329.66(A)(9)(f)
	Credit Line from Schedule A/B: 53.3			100% of fair market value, up to any applicable statutory limit	A A A A A A A A A A A A A A A A A A A
3.	Are you claiming a homestead exemption o (Subject to adjustment on 4/01/22 and every 3  ■ No  □ Yes. Did you acquire the property covered □ No □ Yes	years after that for ca	ses fil	,	,

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 2 of 2

Fill in this informat	ion to identify you	ır case:			
Debtor 1	Shawne Nacole	Mack			
	First Name	Middle Name Last Name			
Debtor 2 (Spouse if, filing)	First Name	Middle Name Last Name		-	
United States Bankr	uptcy Court for the:	NORTHERN DISTRICT OF OHIO			
Case number					
(if known)				☐ Check	if this is an
				amend	ded filing
Official Form	106D				
Schedule D	: Creditors	Who Have Claims Secur	ed by Propert	У	12/15
		If two married people are filing together, both are out, number the entries, and attach it to this form			
1. Do any creditors ha	ve claims secured by	your property?			
☐ No. Check th	is box and submit t	nis form to the court with your other schedules	. You have nothing else	to report on this form.	
Yes. Fill in all	l of the information	below.			
Part 1: List All S	Secured Claims				
		nore than one secured claim, list the creditor separa	tely Column A	Column B	Column C
for each claim. If more	than one creditor has	a particular claim, list the other creditors in Part 2. A		Value of collateral that supports this	Unsecured portion
2.1 Ally Financia	al	Describe the property that secures the claim:	value of collateral. \$5,965.00	claim Unknown	If any Unknown
2.1 Ally Financia	<u>aı</u>	Automobile - Not in debtor's name.	<u>\$5,965.00</u>	Unknown	Unknown
		Debtor is co-signer			
Attn: Bankrı	uptcy	As of the date you file, the claim is: Check all that			
Po Box 3809	-	apply.			
Bloomingto		Contingent			
Number, Street, Cit	y, State & Zip Code	Unliquidated			
Who owes the debt?	Chask and	☐ Disputed  Nature of lien. Check all that apply.			
Debtor 1 only	Check one.	☐ An agreement you made (such as mortgage or	cocurad		
Debtor 2 only		car loan)	Secured		
Debtor 1 and Debto	or 2 only	☐ Statutory lien (such as tax lien, mechanic's lien	)		
At least one of the		☐ Judgment lien from a lawsuit			
☐ Check if this claim community debt	n relates to a	Other (including a right to offset)			
	Opened				
	09/20 Last Active				

Official Form 106D

Date debt was incurred 3/03/21

Schedule D: Creditors Who Have Claims Secured by Property

page 1 of 2

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4900

Last 4 digits of account number

Debtor 1 Shawne Nacole Macl	K	Case number (if known)		
First Name Midd	dle Name Last Name			
2.2 Bridgecrest	Describe the property that secures the claim:	\$20,490.00	\$20,268.00	\$222.00
Creditor's Name	2017 Ford Edge 36,714 miles			
7300 East Hampton				
Avenue Suite 100	As of the date you file, the claim is: Check all that			
Mesa, AZ 85209	apply.			
Number, Street, City, State & Zip Code	☐ Contingent ☐ Unliquidated			
. Tamber, 5.1561, 6.13, 6.116 a 2.15 6616	Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
■ Debtor 1 only	☐ An agreement you made (such as mortgage or s	ecured		
Debtor 2 only	car loan)			
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
lacksquare At least one of the debtors and anoth	er			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
Opened				
01/21 Las	st			
Date debt was incurred Active 04	Last 4 digits of account number 2101			
PennyMac Loan				
Services, LLC	Describe the property that secures the claim:	\$189,233.00	\$210,000.00	\$0.00
Creditor's Name	361 S. Miller Road Fairlawn, OH			
	44333 Summit County Situated in the City of Akron,			
	County of Summit and State of			
	Ohio, and known as being Lot 45 in			
	Fairlawn Heights Estates No.2			
Attn: Correspondence	Allotment as recorded in Plat Book			
Unit	44, Pages 159-160 of Summ As of the date you file, the claim is: Check all that			
Po Box 514387	apply.			
Los Angeles, CA 90051	_ Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
Who owes the debt? Check one.	☐ Disputed  Nature of lien. Check all that apply.			
_	☐ An agreement you made (such as mortgage or s	ecured		
■ Debtor 1 only □ Debtor 2 only	car loan)	Courcu		
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and anoth	,			
☐ Check if this claim relates to a	Other (including a right to offset)			
community debt				
Opened 12/18 Las	<b>.</b>			
Date debt was incurred Active 05	4004			
Active 05	Lust 4 digits of account number			
Add the deller value of variance to the	in Column A on this page. Write that number here:	\$04E 000	2.00	
•	an Column A on this page. Write that number here:	\$215,688		
Write that number here:	and the same same same is an pageo.	\$215,688	3.00	
Part 2: List Others to Be Notified	d for a Debt That You Already Listed			
	to be notified about your bankruptcy for a debt that your owe to someone else, list the creditor in Part 1, and			
	that you listed in Part 1, list the additional creditors he			

debts in Part 1, do not fill out or submit this page.

Official Form 106D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

page 2 of 2

							_	
Fill ir	n this infor	mation to identify your	case:					
Debte	or 1	Shawne Nacole M	lack					
		First Name	Middle Nan	ne	Last Name			
Debte	or 2 se if, filing)	First Name	Middle Nan	10	Last Name			
Unite	ed States Ba	inkruptcy Court for the:	NORTHERN	DISTRICT OF (	OHIO			
Case	number							
(if know	wn)							Check if this is an
							a	mended filing
Offic	cial Forn	n 106E/F						
		:/F: Creditors W	ho Have I	Insecure	d Claims			12/15
		d accurate as possible. Us				or creditors with NO	NPRIORITY clai	
left. At	tach the Cor and case nu	ors Who Have Claims Sec ntinuation Page to this pag mber (if known). Il of Your PRIORITY Un	e. If you have no	information to I				
1. D	o any credit	ors have priority unsecure	d claims against	you?				
	No. Go to F	Part 2.						
	Yes.							
Part		II of Your NONPRIORIT						
_	_	ors have nonpriority unsec	•	•				
L	┛ No. You ha	ve nothing to report in this p	art. Submit this fo	m to the court wi	th your other schedules.			
	Yes.							
u th	nsecured clai	r nonpriority unsecured clam, list the creditor separately tor holds a particular claim, li	/ for each claim. F	or each claim list	ed, identify what type of	claim it is. Do not list c	laims already inc	cluded in Part 1. If more
								Total claim
4.1	2nd Lo		L	ast 4 digits of a	ccount number			\$9,000.00
		y Creditor's Name		hen was the de	sht incurred?			
		tor Pkwy #500 auge, NY 11788	•	viien was the de	ebt incurred?			-
		Street City State Zip Code		s of the date yo	u file, the claim is: Che	ck all that apply		
	Who incu	rred the debt? Check one.						
	Debto	r 1 only	[	☐ Contingent				
	Debtor	r 2 only	[	Unliquidated				
	☐ Debto	☐ Debtor 1 and Debtor 2 only ☐ Disputed						
	☐ At leas	st one of the debtors and and	_		ORITY unsecured claim	:		
		if this claim is for a comr	nunity	Student loans				
	debt	im subject to offset?		Obligations ariseport as priority of	sing out of a separation a	agreement or divorce t	hat you did not	
	■ No	iiii sabject to onset!			iaims on or profit-sharing plans	and other similar deb	nts	
				·		, and other similar det		
	☐ Yes			Other. Specify				

Schedule E/F: Creditors Who Have Unsecured Claims

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36631

Debtor	1 Shawne Nacole Mack		Case number (if known)	
4.2	Affirm, Inc.	Last 4 digits of account number	40KQ	\$806.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 720	When was the debt incurred?	Opened 01/21 Last Active 5/03/21	
	San Francisco, CA 94104  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Unsecured		
4.3	AfterPay US Services	Last 4 digits of account number		\$2,000.00
	Nonpriority Creditor's Name 600 California Street, 11th floor San Francisco, CA 94108	When was the debt incurred?		
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Credit	g plane, and other entitle debte	
4.4	Brite Financial Services Inc.	Lock 4 digits of account number	3277	\$2,663.00
4.4	Nonpriority Creditor's Name	Last 4 digits of account number		\$2,003.00
	Attn: Bankruptcy 101 West 14 Mile Road	When was the debt incurred?	Opened 06/15 Last Active 2/20/18	
	Madison Heights, MI 48071  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?		ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Lease		

Schedule E/F: Creditors Who Have Unsecured Claims

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Debtor 1 Shawne	Nacole Mack		Case number (if known)	
.5 Cleveland	Clinic	Last 4 digits of account number	3089	\$2,000.00
Nonpriority Cre 4125 Medir Akron, OH	na Road	When was the debt incurred?		
Number Street	t City State Zip Code I the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
Debtor 1 or	nly	☐ Contingent		
Debtor 2 or	nly	☐ Unliquidated		
Debtor 1 ar	nd Debtor 2 only	☐ Disputed		
☐ At least one	e of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if the	nis claim is for a community	☐ Student loans ☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
Is the claim s	ubject to offset?	report as priority claims	· · · · · · · · · · · · · · · · · · ·	
■ No		Debts to pension or profit-sharing	g plans, and other similar debts	
Yes		Other. Specify Medical		
.6 Cleveland Nonpriority Cre	Hardwood Flooring	Last 4 digits of account number		\$3,250.00
7926 Twin Broadview	Oak Blvd. Heights, OH 44147	When was the debt incurred?		
	t City State Zip Code	As of the date you file, the claim i		
	I the debt? Check one.			
Debtor 1 or	•	☐ Contingent		
Debtor 2 or	nly	Unliquidated		
_	nd Debtor 2 only	☐ Disputed		
	e of the debtors and another	Type of NONPRIORITY unsecured  ☐ Student loans	a claim:	
☐ Check if the	nis claim is for a community		ration agreement or divorce that you did not	
	ubject to offset?	report as priority claims	ration agreement of divorce that you did not	
■ No		Debts to pension or profit-sharin	g plans, and other similar debts	
☐ Yes		Other. Specify Home repa	irs	
.7 Consumer	s Credit Union	Last 4 digits of account number	7257	\$5,488.00
	ruptcy tate Parkway, #850	When was the debt incurred?	Opened 08/19 Last Active 4/29/21	
	t City State Zip Code  I the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
Debtor 1 or	nly	☐ Contingent		
Debtor 2 or	nly	☐ Unliquidated		
Debtor 1 ar	nd Debtor 2 only	☐ Disputed		
☐ At least one	e of the debtors and another	Type of NONPRIORITY unsecured		
	nis claim is for a community	☐ Student loans		
	ubject to offset?	report as priority claims	ration agreement or divorce that you did not	
■ No		Debts to pension or profit-sharing		
☐ Yes		Other. Specify Automobile	e repossessed.	

Schedule E/F: Creditors Who Have Unsecured Claims

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Debtor	1 Shawne Nacole Mack		Case number (if known)	
4.8	Credit One Bank	Last 4 digits of account number	1639	\$618.00
	Nonpriority Creditor's Name Attn: Bankruptcy Department Po Box 98873 Las Vegas, NV 89193	When was the debt incurred?	Opened 08/20 Last Active 01/21	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharing		
	Yes	Other. Specify Credit Card	<u> </u>	
4.9	Department of Education/Nelnet Nonpriority Creditor's Name	Last 4 digits of account number	8452	\$48,575.00
	Attn: Bankruptcy Po Box 82561 Lincoln, NE 68501	When was the debt incurred?	Opened 07/14 Last Active 4/28/21	
	Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify		
		Educationa	l	
4.1 0	Department of Education/Nelnet  Nonpriority Creditor's Name	Last 4 digits of account number	8352	\$26,797.00
	Attn: Bankruptcy Po Box 82561 Lincoln, NE 68501	When was the debt incurred?	Opened 07/14 Last Active 4/28/21	
	Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify		
		Educationa		

Schedule E/F: Creditors Who Have Unsecured Claims

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Department of Education/Nelnet	Last 4 digits of account number	3247	\$8,148.00
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 82561 Lincoln, NE 68501	When was the debt incurred?	Opened 11/19 Last Active 10/26/20	
Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.	_		
Debtor 1 only	☐ Contingent		
Debtor 2 only	Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured	l claim:	
At least one of the debtors and another	<u></u> '	i ciaiii.	
☐ Check if this claim is for a community debt	Student loans		
s the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
No	Debts to pension or profit-sharin	g plans, and other similar debts	
☐ Yes	Other. Specify		
	Educationa	<u> </u>	
Department of Education/Nelnet	Last 4 digits of account number	3347	\$8,141.00
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 82561 Lincoln, NE 68501	When was the debt incurred?	Opened 11/19 Last Active 4/30/21	
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	claim:	
☐ Check if this claim is for a community	Student loans		
lebt s the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
No	Debts to pension or profit-sharin	g plans, and other similar debts	
☐Yes	Other. Specify		
	Educationa	l .	
Department of Education/Nelnet	Last 4 digits of account number	2747	\$7,620.00
Attn: Bankruptcy Po Box 82561	When was the debt incurred?	Opened 08/20 Last Active 4/30/21	
Lincoln, NE 68501  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
Debtor 1 only	☐ Contingent		
☐ Debtor 1 only ☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:	
☐ Check if this claim is for a community	Student loans		
debt s the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	

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Department of Education/Nelnet Nonpriority Creditor's Name	Last 4 digits of account number	2847	\$3,534.00
Attn: Bankruptcy Po Box 82561	When was the debt incurred?	Opened 08/20 Last Active 4/30/21	
Lincoln, NE 68501  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	Student loans		
debt s the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
No	Debts to pension or profit-sharin	g plans, and other similar debts	
☐ Yes	☐ Other. Specify		
	Educationa	ıl	
Department of Education/Nelnet	Last 4 digits of account number	1847	\$3,147.00
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 82561	When was the debt incurred?	Opened 01/20 Last Active 4/30/21	
.incoln, NE 68501 lumber Street City State Zip Code //no incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
<u>_</u>	☐ Contingent		
Debtor 1 only	☐ Unliquidated		
Debtor 2 only	☐ Disputed		
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ At least one or the debtors and another ☐ Check if this claim is for a community	■ Student loans		
debt s the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharin	g plans, and other similar debts	
☐ Yes	Other. Specify		
	Educationa	ıl	
Discover Financial Nonpriority Creditor's Name	Last 4 digits of account number	4468	\$12,710.00
Attn: Bankruptcy Po Box 3025	When was the debt incurred?	Opened 01/19 Last Active 1/21/21	
New Albany, OH 43054  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
$\square$ Check if this claim is for a community debt		ration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
No	Debts to pension or profit-sharin		
☐ Yes	Other. Specify Credit Card	I	

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Shawne Nacole Mack	Case number (if known)	
Dr. Scott Anwerder	Last 4 digits of account number	\$2
Nonpriority Creditor's Name 460 White Pond Drive #100	When was the debt incurred?	
Akron, OH 44333  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the dami is. Oneon all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
□ Debtor 1 and Debtor 2 only	Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify Medical	
Family Practice of Fairlawn	Last 4 digits of account number	\$5
Nonpriority Creditor's Name 50 N. Miller Road	When was the debt incurred?	<u> </u>
Fairlawn, OH 44333 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the claim is. Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	■ Other. Specify Medical	
	· /	
First Federal Bank	Last 4 digits of account number	\$2,00
Nonpriority Creditor's Name 24700 Chagrin Blvd. #25 Beachwood, OH 44122	When was the debt incurred?	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	Obligations arising out of a separation agreement or divorce that you did not	
s the claim subject to offset?  No	report as priority claims  ☐ Debts to pension or profit-sharing plans, and other similar debts	
	LI Liebis to pension of profit-sparing plans, and other similar debts	

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1 Shawne Nacole Mack		Case number (if known)	
Frontier Communication	Last 4 digits of account number	6150	\$84.00
Nonpriority Creditor's Name Attn: Bankruptcy 19 John St. Middletown, NY 10940	When was the debt incurred?	Opened 01/15 Last Active 03/15	
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only □ Debtor 2 only	☐ Contingent☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed  Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community debt Is the claim subject to offset?		aration agreement or divorce that you did not	
No	report as priority claims  Debts to pension or profit-sharin	ng plans, and other similar debts	
Yes	Other. Specify		
Klarna Bank	Last 4 digits of account number		\$200.00
Nonpriority Creditor's Name 629 N. High Street Columbus, OH	When was the debt incurred?		
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured	d claim:	
At least one of the debtors and another	Student loans	u ciaiii.	
☐ Check if this claim is for a community debt Is the claim subject to offset?		aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing		
Yes	Other. Specify Credit		
OneMain Financial	Last 4 digits of account number	1458	\$9,662.0
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 3251 Evansville, IN 47731	When was the debt incurred?	Opened 08/19 Last Active 01/21	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured		
☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharin	og plans, and other similar debts	
□ Yes	Other. Specify     Unsecured		

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Shawne Nacole Mack	Case number (if known)	
Reproductive Gynecology	Last 4 digits of account number	\$500.0
Nonpriority Creditor's Name 95 Arch Street, #250	When was the debt incurred?	
Akron, OH 44304  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	□ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Medical	
Resurgent Capital Services	Last 4 digits of account number	\$1,000.0
Nonpriority Creditor's Name	Last 4 digits of account number	Ψ1,000.0
P.O. Box 10587	When was the debt incurred?	
Greenville, SC 29603  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify	
Summa Health System	Last 4 digits of account number	\$1,000.0
Nonpriority Creditor's Name 525 E. Market Street	When was the debt incurred?	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
P. O. Box 3540		
Akron, OH 44309-3540 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	······································	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□Yes	■ Other. Specify Medical	

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Synchrony Bank	Last 4 digits of account number	2326	\$2,539.00
Nonpriority Creditor's Name Attn: Bankruptcy Dept Po Box 965060	When was the debt incurred?	Opened 11/19 Last Active 01/21	. ,
Orlando, FL 32896 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed  Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?		ration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	■ Other. Specify Charge Acc	count	
Synchrony Bank/Amazon	Last 4 digits of account number	7555	\$734.00
Nonpriority Creditor's Name	Last 4 digits of account number		Ψ104.00
Attn: Bankruptcy Po Box 965060	When was the debt incurred?	Opened 01/19 Last Active 01/21	
Orlando, FL 32896  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	Other. Specify Charge Acc	count	
Synchrony Bank/Gap	Last 4 digits of account number	3520	\$1,966.00
Nonpriority Creditor's Name Attn: Bankruptcy Dept Po Box 965060 Orlando, FL 32896	When was the debt incurred?	Opened 04/19 Last Active 1/05/21	
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
☐ Yes	■ Other. Specify Credit Card		

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Synchrony Bank/Sams	Last 4 digits of account number	8915	\$1,507.00
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 965060	When was the debt incurred?	Opened 10/20 Last Active 01/21	
Orlando, FL 32896  Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.	,,,,,,		
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt s the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not	
No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	Other. Specify Charge Acc	count	
Synchrony Bank/TJX Nonpriority Creditor's Name	Last 4 digits of account number	3739	\$240.00
Attn: Bankruptcy Po Box 965064 Orlando, FL 32896	When was the debt incurred?	Opened 1/02/19 Last Active 12/17/20	
Iumber Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community	Student loans		
debt s the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharin		
Yes	Other. Specify Charge Acc	count	
Synchrony/Ashley Furniture			
Homestore Nonpriority Creditor's Name	Last 4 digits of account number	9112	\$1,093.00
Attn: Bankruptcy Po Box 965060 Orlando, FL 32896	When was the debt incurred?	Opened 04/19 Last Active 01/21	
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharin	og plans, and other similar debts	
☐ Yes	■ Other. Specify Charge Acc	Count	

Schedule E/F: Creditors Who Have Unsecured Claims

Page 11 of 13

Debtor 1 Shawne Nacole Mack		Case number (if known)		
4.3	Target	Last 4 digits of account number	6010	\$1,778.00
	Nonpriority Creditor's Name c/o Financial & Retail Services Mailstop BT PO Box 9475 Minneapolis, MN 55440	When was the debt incurred?	Opened 04/19 Last Active 2/03/21	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	l	
4.3	University Hospitals of Cleveland	Last 4 digits of account number	2546	\$2,000.00
	Nonpriority Creditor's Name P. O. Box 94564 Cleveland, OH 44101	When was the debt incurred?		
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Medical		
4.3	US Bank National Association  Nonpriority Creditor's Name	Last 4 digits of account number	8442	\$2,779.83
	5065 Wooster Road Cincinnati, OH 45226	When was the debt incurred?	2016	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	■ Other. Specify Checking a		
	□ res	Other. Specify		

Part 3: List Others to Be Notified About a Debt That You Already Listed

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Page 12 of 13

<sup>5.</sup> Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Debtor 1 Shawne Nacole Mack		Case number (if known)		
Name and Address	On which entry in Part 1 or Part 2 d	On which entry in Part 1 or Part 2 did you list the original creditor?		
DiCaudo, Pitchford & Yoder, LLC	Line 4.6 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims		
209 South Main Street, Floor 3 Akron, OH 44308		Part 2: Creditors with Nonpriority Unsecured Claims		
	Last 4 digits of account number	1144		
Name and Address	On which entry in Part 1 or Part 2 d	id you list the original creditor?		
Thomas Michael Jr. & Associates	Line 4.34 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims		
Crystal M. Duplay 1000 Cliff Mine Road Suite 330		■ Part 2: Creditors with Nonpriority Unsecured Claims		
Pittsburgh, PA 15275	Last 4 digits of account number	0480		
		U <del>1</del> 00		

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
Total	6a.	Domestic support obligations	6a.	\$ 0.00
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
Total	6f.	Student loans	6f.	\$ 105,962.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 68,367.83
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 174,329.83

Fill in this infor	rmation to identify your	case:		
Debtor 1	Shawne Nacole M			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF OHIO	
Case number				
(if known)				Check if this is an
				amended filing

### Official Form 106G

# **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company wit Name, Numb	h whom you have the o	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	<del>-</del>
2.2					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.3					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				
	Number	Street			_
	City		State	ZIP Code	_

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

Page 1 of 1

Fill in this info	rmation to identify your	case:			
Debtor 1	Shawne Nacole I				
Debtor 2	First Name	Middle Name	Last Name	_	
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	Sankruptcy Court for the:	NORTHERN DISTRICT	OF OHIO		
Case number (if known)					☐ Check if this is an amended filing
	orm 106H e H: Your Cod	ebtors			12/15
people are filin fill it out, and n your name and	g together, both are equ umber the entries in the case number (if known	ally responsible for supp	lying correct information the Additional Page to	n. If more space is n this page. On the to	ate as possible. If two married needed, copy the Additional Page, p of any Additional Pages, write
□ No ■ Yes					
		u lived in a community pro , Nevada, New Mexico, Pu			ry states and territories include
■ No. Go t	o line 3.				
_		use, or legal equivalent live	with you at the time?		
in line 2 ag	gain as a codebtor only 0), Schedule E/F (Officia	f that person is a guaran	tor or cosigner. Make su	re you have listed th	g with you. List the person shown he creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
	mn 1: Your codebtor Number, Street, City, State and Z	IP Code		Column 2: The cre Check all schedule	editor to whom you owe the debt es that apply:
361	n E. Mack S. Miller Road on, OH 44333			■ Schedule D, li □ Schedule E/F □ Schedule G _ Ally Financial	

						<b>=</b>						
Fill	in this information to identify your c	ase:										
De	btor 1 Shawne Nac	cole Mack										
	btor 2											
Un	ited States Bankruptcy Court for the	: NORTHERN DISTRIC	CT OF OHIO									
	se number nown)	-			□ Ai		ed filing ent showir	ng postpetition	•			
$\cap$	fficial Form 106I								ollowing date:			
	chedule I: Your Inc	ome				M	M / DD/ Y	YYY		40/45		
	as complete and accurate as pos		onle are filing togeth	er (Dehi	or 1	and Dehi	or 2) ho	th are equ	ually resnons	12/15 ible for		
spo atta	plying correct information. If you use. If you are separated and you ch a separate sheet to this form.  The describe Employment	ır spouse is not filing w	ith you, do not inclu	ide infor	mati	on about	your spo	ouse. If m	ore space is	needed,		
1.	Fill in your employment information.				Debtor 1				Debtor 2 or non-filing spouse			
	If you have more than one job,	Employment status	■ Employed				■ Employed					
	attach a separate page with information about additional	Employment status	☐ Not employed				☐ Not employed					
	employers.	Occupation	Senior Billing Specialist		st							
	Include part-time, seasonal, or self-employed work.	Employer's name	Trimark (S.S. K	emp &	Co.)							
	Occupation may include student or homemaker, if it applies.	Employer's address	4567 Willow Parkway Cleveland, OH 44125				ОН					
		How long employed t	here? 16 mor	nths								
De	rt 2: Give Details About Mor		<u> 10 11101</u>				_					
Esti spo	imate monthly income as of the duse unless you are separated.  ou or your non-filing spouse have me e space, attach a separate sheet to	ate you file this form. If	,	·		•	hat perso	on on the I	•	J		
						1 Of Den			ing spouse			
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	4,	061.20	\$	0.00			
3.	Estimate and list monthly overt	ime pay.		3.	+\$	1,	142.22	+\$	0.00			
4.	Calculate gross Income. Add lin	ne 2 + line 3.		4.	\$	5,20	3.42	\$	0.00			

				For Debtor 1		For Debtor 2 or non-filing spouse	
	Copy	y line 4 here	4.	\$	5,203.42	\$	0.00
5.	List	all payroll deductions:					
	5a. 5b.	Tax, Medicare, and Social Security deductions  Mandatory contributions for retirement plans	5a. 5b.	\$	797.42	\$	0.00
	5c.	Voluntary contributions for retirement plans	5c.	\$	104.07	\$	0.00
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	0.00
	5e.	Insurance	5e.	\$	346.08	\$	0.00
	5f.	Domestic support obligations	5f.	\$	0.00	\$	0.00
	5g.	Union dues	5g.	\$	0.00	\$	0.00
	5h.	Other deductions. Specify:	_ 5h.+	\$	0.00	+ \$	0.00
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	1,247.57	\$	0.00
7.	Calc	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	3,955.85	\$	0.00
8.	List a	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$	0.00
	8b.	Interest and dividends	8b.	\$—	0.00	\$	0.00
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$ \$	0.00	\$ \$	0.00
	8d.	Unemployment compensation	8d.	\$—	0.00	\$	0.00
	8e.	Social Security	8e.	\$	0.00	\$	0.00
	8f. 8g. 8h.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:  Pension or retirement income Other monthly income. Specify:	_ 8f. - 8g. 8h.+	\$ \$	0.00 0.00 0.00	\$ \$ + \$	0.00 0.00 0.00
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	0.00
10.		ulate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	0.  \$	3	+ \$_		0.00 = \$ 3,955.85
11.	Inclu other	e all other regular contributions to the expenses that you list in Schedule and contributions from an unmarried partner, members of your household, your or friends or relatives.  Not include any amounts already included in lines 2-10 or amounts that are not a cify:	depen				hedule J. 11. +\$ 0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rest e that amount on the Summary of Schedules and Statistical Summary of Certain ies					12. \$ <b>3,955.85</b> Combined
13.	Do y	rou expect an increase or decrease within the year after you file this form? No.	•				monthly income
		Yes. Explain: No longer working second job. Recently started mandatory overtime. Working a rbi-weekly.	nand	atory '	7.5 hours of o	vertim	ne per week or 15 hrs.

Official Form 106l Schedule I: Your Income page 2

Fill	in this informa	tion to identify yo	our case:			I		
	tor 1	Shawne Nac		<b>«</b>		Chec	k if this is:	
Dah	tor 2					_	An amended filing	
	ouse, if filing)						13 expenses as of	ving postpetition chapter the following date:
Unit	ed States Bankr	uptcy Court for the	: NORTH	HERN DISTRICT OF OHIC	)	_	MM / DD / YYYY	
Cas	e number							
(If kı	nown)							
Of	fficial Fo	rm 106J						
		J: Your	Exper	nses				12/15
Be info nur	as complete a ormation. If m mber (if know	and accurate as ore space is ne n). Answer eve	s possible eded, atta ry questio	. If two married people and the contract in the contract is another sheet to this				
Par 1.	t 1: Descr Is this a joir	ibe Your House nt case?	ehold					
	■ No. Go to							
	☐ Yes. <b>Doe</b>	s Debtor 2 live	in a separ	ate household?				
		_	-1 Cl- O(C-	'-l F 400 l 0 . F	. ( 0	-11-1-( D-1-1	0	
				ial Form 106J-2, <i>Expenses</i>	s tor Separate House	enola of Debt	or 2.	
2.	Do you have	e dependents?	☐ No					
	Do not list Do Debtor 2.	ebtor 1 and	Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state	the			_			□ No
	dependents	names.			Son			Yes
					Daughter		20	□ No ■ Yes
								□ No
					Son		23	■ Yes
								□ No
3.	Do your exp	enses include		l No				☐ Yes
		f people other t d your depende	:han ∟	l Yes				
Est	imate your ex		our bankr	ly Expenses uptcy filing date unless y sy is filed. If this is a supp				
	olicable date.	date after the	banni apte	y is med. If this is a supp	Jonethal Gonedan	o, oncon in	ie box at the top o	Talle form and the first the
the	value of sucl	n assistance an		government assistance i			v	
(Off	ficial Form 10	l6l.)					Your exp	enses
4.		or home owners and any rent for th		nses for your residence. I or lot.	nclude first mortgag	e 4. \$	i	1,483.00
	If not includ	led in line 4:						
	4a. Real e	estate taxes				4a. \$		0.00
		rty, homeowner'	s, or renter	r's insurance		4b. \$		0.00
				upkeep expenses		4c. \$		300.00
_	4d. Home	owner's associa				4d. \$		0.00

Shawn	e Nacole Mack	Case num	ber (if known)	
ities:				
Electrici	ty, heat, natural gas	6a.	\$	220.00
Water, s	sewer, garbage collection	6b.	\$	171.00
Telepho	ne, cell phone, Internet, satellite, and cable services	6c.	\$	175.00
Other. S	Specify:	6d.	\$	0.00
od and hou	usekeeping supplies	7.	\$	500.00
Idcare and	I children's education costs	8.	\$	0.00
thing, laur	ndry, and dry cleaning	9.	\$	100.00
•	· · · · · · · · · · · · · · · · · · ·	10.	\$	100.00
	•			125.00
	•		Ť	120.00
-		12.	\$	200.00
		13.	\$	100.00
aritable co	ntributions and religious donations	14.	\$	0.00
urance.	•		· -	
	insurance deducted from your pay or included in lines 4 or 20.			
. Life insu	ırance	15a.	\$	0.00
. Health in	nsurance	15b.	\$	0.00
. Vehicle	insurance	15c.	\$	85.00
l. Other in	surance. Specify:	15d.	\$	0.00
ecify:	, , , , , , , , , , , , , , , , , , ,	16.	\$	0.00
			·	429.00
			·	0.00
			·	0.00
l. Other. S	Specify:	17d.	\$	0.00
			Φ.	0.00
		18.		
	nts you make to support others who do not live with you.	40	\$	0.00
	on and a series of the short of the United Atlanta College Community of the		<b>-</b>	
				0.00
	• • •			0.00
			· ·	0.00
			·	0.00
			·	0.00
			·	0.00
er: Specify	<i>r</i>	21.	+\$	0.00
culate vou	r monthly expenses			
•	• •		\$	3,988.00
	9			3,300.00
			I .	
. Add line 2	22a and 22b. The result is your monthly expenses.		\$	3,988.00
culate you	r monthly net income.			
. Copy lin	e 12 (your combined monthly income) from Schedule I.	23a.	\$	3,955.85
. Сору уо	our monthly expenses from line 22c above.	23b.	-\$	3,988.00
		22-	· ·	-32.15
The resu	ult is your <i>monthly net income</i> .	∠3C.	Ψ	-32.13
example, do lification to th	you expect to finish paying for your car loan within the year or do you expect you			or decrease because of a
No.				
Yes.	Explain here:			
	ities:  Electrici Water, s Telepho Other. S od and hou Idcare and Idcare and Idical and consportation Into include Into in	ities:  Electricity, heat, natural gas Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services Other. Specify: Indicate and children's education costs thing, laundry, and dry cleaning sonal care products and services Idicate and children's education costs thing, laundry, and dry cleaning sonal care products and services Idical and dental expenses Insportation. Include gas, maintenance, bus or train fare. Include car payments. ertainment, clubs, recreation, newspapers, magazines, and books arritable contributions and religious donations arrance. It include insurance deducted from your pay or included in lines 4 or 20. Life insurance Health insurance Health insurance Other insurance, Specify: es. Do not include taxes deducted from your pay or included in lines 4 or 20. city: allment or lease payments: Car payments for Vehicle 1 Car payments for Vehicle 2 Other. Specify: Other. Specify: In payments of allimony, maintenance, and support that you did not report at lucted from your pay on line 5, Schedule I, Your Income (Official Form 106I). In payments you make to support others who do not live with you. city: In payments you make to support others who do not live with you. City: Real estate taxes Property, homeowner's, or renter's insurance Maintenance, repair, and upkeep expenses Homeowner's association or condominium dues er: Specify: Culate your monthly expenses Add lines 4 through 21. Copy line 22 (monthly expenses Add lines 22 and 22b. The result is your monthly expenses. Culate your monthly net income. Copy line 12 (your combined monthly income) from Schedule I. Copy your monthly expenses from line 22c above.  Subtract your monthly expenses from your monthly income. The result is your monthly expenses from your monthly income. The result is your monthly expenses from your car loan within the year or do you expect your monthly, do you expect to finish paying for your car loan within the year or do you expect your montage?  You expect an increase or decrease in your car l	ities:  Electricity, heat, natural gas  Electricity, heat, natural gas  Water, sewer, garbage collection  Telephone, cell phone, Internet, satellite, and cable services  Cher. Specify:  da and housekeeping supplies  7. Idedare and children's education costs  thing, laundry, and dry cleaning  sonal care products and services  lical and dental expenses  nsportation. Include gas, maintenance, bus or train fare.  not include car payments.  retrainment, clubs, recreation, newspapers, magazines, and books  ritiable contributions and religious donations  urance.  not include insurance deducted from your pay or included in lines 4 or 20.  Life insurance  15a.  Health insurance  15b.  Vehicle insurance specify:  8c. Do not include taxes deducted from your pay or included in lines 4 or 20.  cify:  16.  17a.  18a.  19a.  19a.	ities: Electricity, heat, natural gas Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services Cother. Specify: da and housekeeping supplies Telephone, cell phone, Internet, satellite, and cable services Cother. Specify: da and housekeeping supplies Total and control and the con

Fill in this inform	ation to identify your	case:				
Debtor 1	Shawne Nacole I	Mack				
	First Name	Middle Name	Las	t Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Las	t Name		
United States Ban	Junior Count for the	NORTHERN DISTRICT	OE OUIO			
United States Ban	kruptcy Court for the:	NORTHERN DISTRICT	OF OHIO			
Case number						
(if known)						☐ Check if this is an
						amended filing
Official Form	106Dec					
		an Individual	Dobte	orio Cabadu	ulaa	
Declarati	on About a	an Individual	Depti	or s achedu	lies	12/15
If two married ned	onle are filing togethe	r, both are equally respon	sible for s	unnlying correct inform	nation	
ii two married pec	opic are ming togethe	r, both are equally respon	isibic ioi s	upplying correct inform	nation.	
						ment, concealing property, or
	U.S.C. §§ 152, 1341,		ruptcy cas	e can result in tines up	to \$250,000	0, or imprisonment for up to 20
,	33,,					
Sign	Below					
Did you pay	or agree to pay some	eone who is NOT an attorr	ney to help	you fill out bankruptcy	y forms?	
■ No						
140						
☐ Yes. Na	ame of person					ruptcy Petition Preparer's Notice, and Signature (Official Form 119)
				1	Deciaration,	and Signature (Official Form 119)
	y of perjury, I declare true and correct.	that I have read the summ	nary and s	chedules filed with this	s declaratio	n and
X /s/ Shaw	vne Nacole Mack		х			
	Nacole Mack		^	Signature of Debtor 2		
Signature	e of Debtor 1			-		
Data !	lv. 4. 2024			Data		
Date <u>J</u>	uly 1, 2021			Date		

Official Form 106Dec

**Declaration About an Individual Debtor's Schedules** 

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Fill i	n this inforn	nation to identify you	r case:			
Debt	or 1	Shawne Nacole				
Debt	or 2	First Name	Middle Name	Last Name		
	se if, filing)	First Name	Middle Name	Last Name		
Unite	ed States Ba	nkruptcy Court for the:	NORTHERN DISTRICT C	OF OHIO		
Case (if know	e number wn)				-	heck if this is an mended filing
Sta Be as	complete a	of Financial		re filing together, both are	ankruptcy equally responsible for suppy additional pages, write you	
		n). Answer every que		Lived Defere		
Part 1. \		r current marital statu	arital Status and Where You us?	Lived Defore		
 [	☐ Married ■ Not mar		-			
2. I	Ouring the la	ast 3 years, have you	lived anywhere other than	where you live now?		
 	■ No □ Yes. Lis	t all of the places you l	lived in the last 3 years. Do no	ot include where you live now	<i>.</i>	
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
					ity property state or territory co, Texas, Washington and W	
l I	■ No □ Yes. Ma	ake sure you fill out <i>Scl</i>	hedule H: Your Codebtors (Of	fficial Form 106H).		
Part	2 Explai	n the Sources of You	ır Income			
F	Fill in the tota	al amount of income yo	mployment or from operatin ou received from all jobs and a have income that you receive	all businesses, including part-		dar years?
[ [	□ No ■ Yes. Fill	I in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$33,201.89	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 1

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

■ No. Go to line 7.

Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

Creditor's Name and Address

Dates of payment

Total amount paid

Amount you still owe

Was this payment for ...

Official Form 107 Statement of

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Statement of Financial Affairs for Individuals Filing for Bankruptcy

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Debtor 1	Shawne Nacole Mack		Cas	se number (if known)		
<i>Inside</i> of wh	in 1 year before you filed for bankrupt ers include your relatives; any general pa ich you are an officer, director, person in siness you operate as a sole proprietor. 1 any.	artners; relatives of any gen a control, or owner of 20% of	neral partners; partners or more of their voting	erships of which you	ou are a general ny managing a	al partner; corporation agent, including one fo
_	No Yes. List all payments to an insider.					
Insid	der's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
insid Includ	in 1 year before you filed for bankrupt er? de payments on debts guaranteed or cos No		yments or transfer a	any property on a	account of a d	ebt that benefited an
	Yes. List all payments to an insider					
Insid	der's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment ditor's name
	Identify Legal Actions, Repossession in 1 year before you filed for bankrupt	cy, were you a party in a				
	Ill such matters, including personal injury fications, and contract disputes.	cases, small claims action	ns, divorces, collection	n suits, paternity a	actions, suppor	t or custody
	No					
<b>.</b>	Yes. Fill in the details.					
	e title e number	Nature of the case	Court or agency		Status of th	ne case
vs S 20C	veland Hardwood Flooring Llc SHAWNE MACK SVF01144 SVF01144	CIVIL JUDGMENT	AKRON MUNICIPAL COURT 217 S. High Street Akron, OH 44308		☐ Pending ☐ On appeal ☐ Concluded - 3,250.00	
	te Of Ohio vs SHAWNE MACK :J076966	STATE TAX LIEN	LORAIN COUN PLEAS	TY COMMON	☐ Pending ☐ On appe	eal
					- 2,129.00	)
	Bank vs Shawne Nicole Mack 2021-02-0480	Civil	Summit Count Common Pleas 205 South Higl Akron, OH 443	S n Street	☐ Pending ☐ On appe	eal
	in 1 year before you filed for bankrupt k all that apply and fill in the details belo				shed, attached	d, seized, or levied?
_	No. Go to line 11. Yes. Fill in the information below.					
	ditor Name and Address	Describe the Property		Date		Value of the
		Explain what happene	d			property

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Statement of Financial Affairs for Individuals Filing for Bankruptcy

insurance claims on line 33 of Schedule A/B: Property.

Pai	t 7: List Certain Payments or Transfers								
16.	Within 1 year before you filed for bankruptc consulted about seeking bankruptcy or pre Include any attorneys, bankruptcy petition pre	eparing a bankruptcy p	etition?		erty to anyone you				
	□ No								
	Yes. Fill in the details.								
	Person Who Was Paid	Description and	Lyalua of any proparty	Data nayment	Amount of				
	Address Email or website address Person Who Made the Payment, if Not You	transferred	value of any property	Date payment or transfer was made	payment				
	Attorney Mary Lou Burns 484 S. Miller Road Akron, OH 44333	See Attached Statement for	Attorney Compensati amount paid.	on Various dates	\$0.00				
17.	Within 1 year before you filed for bankrupte promised to help you deal with your credit. Do not include any payment or transfer that you ■ No □ Yes. Fill in the details.	ors or to make paymen		If pay or transfer any prope	erty to anyone who				
	Person Who Was Paid Address	Description and transferred	value of any property	Date payment or transfer was made	Amount of payment				
18.	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.								
	No Yes. Fill in the details.								
	Person Who Received Transfer	Description and	l value of Dec	scribe any property or	Date transfer was				
	Address		property transferred paymen		made				
	Person's relationship to you								
19.	Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)  No								
	Yes. Fill in the details.								
	Name of trust	Description and	value of the property tra	ansferred	Date Transfer was made				
Par	rt 8: List of Certain Financial Accounts, Ir	nstruments. Safe Depos	sit Boxes. and Storage U	Inits	maac				
20.					our benefit closed				
20.	sold, moved, or transferred? Include checking, savings, money market, houses, pension funds, cooperatives, asso	or other financial acco	unts; certificates of depo		, ,				
	■ No								
	Yes. Fill in the details.								
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold,	Last balance before closing or				

Statement of Financial Affairs for Individuals Filing for Bankruptcy

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transferred

21.	Do you now have, or did you have w cash, or other valuables?	vithin 1 year	before you filed for bankruptcy, a	ny safe depo	sit box or other deposit	ory for securities,
	■ No					
	☐ Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIF	P Code)	Who else had access to it? Address (Number, Street, City, State and ZIP Code)	Describe th	ne contents	Do you still have it?
22.	Have you stored property in a storag  ■ No □ Yes. Fill in the details.	ge unit or pl	ace other than your home within 1	year before	you filed for bankruptcy	?
	Name of Storage Facility Address (Number, Street, City, State and ZIF	P Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe th	ie contents	Do you still have it?
Par	rt 9: Identify Property You Hold or	Control for	Someone Else			
23.	Do you hold or control any property for someone.	that someo	ne else owns? Include any proper	ty you borro	wed from, are storing fo	r, or hold in trust
	Yes. Fill in the details.					
	Owner's Name Address (Number, Street, City, State and ZIF	P Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe th	e property	Value
Par	rt 10: Give Details About Environme	ental Informa	ation			
For	the purpose of Part 10, the following	definitions	apply:			
	Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.					
_	Site means any location, facility, or to own, operate, or utilize it, including	ng disposal	sites.			
	Hazardous material means anything hazardous material, pollutant, conta			s waste, haza	irdous substance, toxic	substance,
Rep	port all notices, releases, and proceed	lings that yo	ou know about, regardless of when	they occuri	red.	
24.	Has any governmental unit notified	you that you	ı may be liable or potentially liable	under or in	violation of an environm	ental law?
	■ No □ Yes. Fill in the details.					
	Name of site Address (Number, Street, City, State and ZIF	P Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)		nmental law, if you	Date of notice
25.	Have you notified any governmental	unit of any	release of hazardous material?			
	■ No □ Yes. Fill in the details.					
	Name of site		Governmental unit	Environ	nmental law, if you	Date of notice
	Address (Number, Street, City, State and ZIF	P Code)	Address (Number, Street, City, State an ZIP Code)			

Statement of Financial Affairs for Individuals Filing for Bankruptcy

26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and order					nd orders.				
		■ No □ Yes. Fill in the details.							
		se Title se Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nati	ure of the case	Status of the case			
Par	t 11:	Give Details About Your Business or Co	onnections to Any Business						
27.	With	nin 4 years before you filed for bankruptcy	y, did you own a business or have an	y of t	the following connections to any	business?			
		$\hfill \square$ A sole proprietor or self-employed in	a trade, profession, or other activity,	eithe	er full-time or part-time				
		☐ A member of a limited liability compa	ny (LLC) or limited liability partnersh	ip (Ll	LP)				
		☐ A partner in a partnership							
		☐ An officer, director, or managing executive of a corporation							
		☐ An owner of at least 5% of the voting	or equity securities of a corporation						
		No. None of the above applies. Go to Pa	rt 12.						
	Yes. Check all that apply above and fill in the details below for each business.								
			Describe the nature of the business		Employer Identification number				
		dress nber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper		Do not include Social Security number or ITIN.				
					Dates business existed				
28.		nin 2 years before you filed for bankruptcy itutions, creditors, or other parties.	y, did you give a financial statement t	to an	yone about your business? Inclu	de all financial			
		No							
		Yes. Fill in the details below.							
	Name Address (Number, Street, City, State and ZIP Code)								

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Debtor 1 Shawne Nacole M	ack	Case number (if known)
Part 12: Sign Below		
are true and correct. I understar	nd that making a false statement, concealing pout in fines up to \$250,000, or imprisonment for	nents, and I declare under penalty of perjury that the answers roperty, or obtaining money or property by fraud in connection up to 20 years, or both.
/s/ Shawne Nacole Mack		
Shawne Nacole Mack Signature of Debtor 1	Signature of Debtor	2
Date July 1, 2021	Date	
•	to Your Statement of Financial Affairs for Indi	viduals Filing for Bankruptcy (Official Form 107)?
No		
☐ Yes		
Did you pay or agree to pay son	neone who is not an attorney to help you fill ou	t bankruptcy forms?
■ No		•

☐ Yes. Name of Person \_\_\_\_\_. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Fill in this infor	mation to identify your	case:		
Debtor 1	Shawne Nacole M		LauNess	
Debtor 2	First Name	Middle Name	Last Name	
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DIS	TRICT OF OHIO	
Case number (if known)				☐ Check if this is an amended filing
Official Fo <b>Stateme</b> i		n for Indiv	viduals Filing Under Chapt	er 7 12/15
	ividual filing under chap		Il out this form if:	
you have lease	ever is earlier, unless th	nd the lease has r ithin 30 days after	not expired. You file your bankruptcy petition or by the date s ne time for cause. You must also send copies to t	
	eople are filing together nd date the form.	in a joint case, bo	oth are equally responsible for supplying correct	information. Both debtors must
write y	our name and case nun	nber (if known).	s needed, attach a separate sheet to this form. Or	n the top of any additional pages,
1. For any credit			D: Creditors Who Have Claims Secured by Proper	ty (Official Form 106D), fill in the
information be Identify the cr	elow. editor and the property tl	nat is collateral	What do you intend to do with the property the secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's A	Ally Financial		☐ Surrender the property. ☐ Retain the property and redeem it.	□ No
Description of property securing debt:	name. Debtor is co		■ Retain the property and enter into a Reaffirmation Agreement.  □ Retain the property and [explain]:	■ Yes
	Bridgecrest		■ Surrender the property.	□ No
name:  Description of property securing debt:		,714 miles	<ul> <li>□ Retain the property and redeem it.</li> <li>□ Retain the property and enter into a Reaffirmation Agreement.</li> <li>□ Retain the property and [explain]:</li> </ul>	■ Yes
Creditor's <b>P</b> name:	ennyMac Loan Servi	ces, LLC	☐ Surrender the property. ☐ Retain the property and redeem it.	□ No
Description of	361 S. Miller Road 44333 Summit Co Situated in the City	unty	Retain the property and enter into a Reaffirmation Agreement.	■ Yes

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Official Form 108

Best Case Bankruptcy

page 1

Statement of Intention for Individuals Filing Under Chapter 7

Debtor 1 Shaw	vne Nacole Mack	Case number (if known)	_
property securing debt:  County of Summit and State of Ohio, and known as being Lot 45 in Fairlawn Heights Estates No.2 Allotment as recorded in Plat Book 44, Pages 159-160 of Summ		☐ Retain the property and [explain]:	_
	our Unexpired Personal Property Leases	d in Schedule G: Executory Contracts and Unexpire	d Leases (Official Form 106G) fill
in the information	n below. Do not list real estate leases. U	nexpired leases are leases that are still in effect; the trustee does not assume it. 11 U.S.C. § 365(p)(	e lease period has not yet ended.
Describe your u	nexpired personal property leases		Will the lease be assumed?
Lessor's name:			□ No
Description of lea Property:	sea		☐ Yes
Lessor's name: Description of lea	and		□ No
Property:	seu		☐ Yes
Lessor's name: Description of lea	sed.		□ No
Property:	30 <b>u</b>		☐ Yes
Lessor's name: Description of lea	has		□ No
Property:	30 <b>u</b>		☐ Yes
Lessor's name: Description of lea	sed		□ No
Property:	-		☐ Yes
Lessor's name: Description of lea	sed		□ No
Property:			☐ Yes
Lessor's name: Description of lea	sed		□ No
Property:			☐ Yes

Statement of Intention for Individuals Filing Under Chapter 7

page 2

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Best Case Bankruptcy

☐ Yes

Debtor 1	Shawne Nacole Mack	Case number (if known)
Part 3:	Sign Below	
	enalty of perjury, I declare that I have indica that is subject to an unexpired lease.	nted my intention about any property of my estate that secures a debt and any personal
X /s/	Shawne Nacole Mack	X
	awne Nacole Mack	Signature of Debtor 2
Sig	nature of Debtor 1	
Dat	te July 1, 2021	Date

Statement of Intention for Individuals Filing Under Chapter 7

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Best Case Bankruptcy

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Fill in	n this information to identify your case:			directed in this form and in Form
Debt	for 1 Shawne Nacole Mack		22A-1Supp:	
Debt (Spou	tor 2 se, if filing)		■ 1. There is no pres	sumption of abuse
Unite	ed States Bankruptcy Court for the: Northern District of	of Ohio	applies will be n	to determine if a presumption of abuse made under <i>Chapter 7 Means Test</i>
Case (if kno	e number wn)			ficial Form 122A-2).
				t does not apply now because of y service but it could apply later.
			☐ Check if this is a	ın amended filing
Off Off	<u>icial Form 122A - 1</u>			
Ch	apter 7 Statement of Your Cui	rrent Monthly Inc	come	04/20
attach case i qualif Part		which the additional information om a presumption of abuse becau ption from Presumption of Abuse	applies. On the top of a use you do not have prin	ny additional pages, write your name and marily consumer debts or because of
1.	What is your marital and filing status? Check one or	nly.		
	Not married. Fill out Column A, lines 2-11.		0.44	
	Married and your spouse is filing with you. Fill of		s 2-11.	
	☐ Married and your spouse is NOT filing with you.	• •	alumana A and D. lines (	0.44
	Living in the same household and are not lega			
	☐ Living separately or are legally separated. Fill penalty of perjury that you and your spouse are I living apart for reasons that do not include evading the control of t	legally separated under nonba	nkruptcy law that applic	es or that you and your spouse are
10 the	Il in the average monthly income that you received from all 11(10A). For example, if you are filing on September 15, the 6-ne 6 months, add the income for all 6 months and divide the tota ouses own the same rental property, put the income from that p	nonth period would be March 1 throal by 6. Fill in the result. Do not inclu	ough August 31. If the amoude any income amount m	ount of your monthly income varied during nore than once. For example, if both
			Column A Debtor 1	Column B Debtor 2 or non-filing spouse
2.	Your gross wages, salary, tips, bonuses, overtime, payroll deductions).	and commissions (before all	\$ 5,533.65	\$
3.	<b>Alimony and maintenance payments.</b> Do not include Column B is filled in.	payments from a spouse if	\$	\$
4.	All amounts from any source which are regularly prof you or your dependents, including child support from an unmarried partner, members of your household and roommates. Include regular contributions from a spilled in. Do not include payments you listed on line 3.	t. Include regular contributions d, your dependents, parents,	\$	\$
5.	Net income from operating a business, profession,			
		Debtor 1 \$ 0.00		
	Gross receipts (before all deductions)	\$ <u>0.00</u> -\$ <u>0.00</u>		
	Ordinary and necessary operating expenses  Net monthly income from a business, profession, or far	· <del></del>	> \$ 0.00	\$
6	Net income from rental and other real property		<u> </u>	*
0.		Debtor 1		
	Gross receipts (before all deductions)	\$ 0.00		
	Ordinary and necessary operating expenses	-\$ 0.00		
	Net monthly income from rental or other real property	\$ 0.00 Copy here ->	>\$	\$
7	Interest dividends and royalties		\$ 0.00	\$

Official Form 122A-1

**Chapter 7 Statement of Your Current Monthly Income** 

page 1

Best Case Bankruptcy

7. Interest, dividends, and royalties

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Debtor 1	Shawne Nacole Mack	Case number (if known)	
	Signature of Debtor 1		
Da	ate <b>July 1, 2021</b>		
	MM / DD / YYYY		
	If you checked line 14a, do NOT fill out or file Form 122A-2.		

If you checked line 14b, fill out Form 122A-2 and file it with this form.

Official Form 122A-1

### **Current Monthly Income Details for the Debtor**

#### **Debtor Income Details:**

Debtor 1

Income for the Period **01/01/2021** to **06/30/2021**.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: **EMPLOYMENT** 

Year-to-Date Income:

Total Year-to-Date Income: \$24,743.02 from check dated 6/30/2021.

Average Monthly Income: \$4,123.84 .

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Prior employment

Year-to-Date Income:

Total Year-to-Date Income: \$8,458.87 from check dated 6/30/2021

Average Monthly Income: \$1,409.81.

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

## The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$78	administrative fee
+ \$15	trustee surcharge
\$338	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

### **Chapter 11: Reorganization**

\$1,167 filing fee

\$571 administrative fee

\$1,738 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$78	administrative fee
	\$278	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$78	administrative fee
	\$313	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/forms/bankruptcy-forms

### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

## Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://www.uscourts.gov/services-forms/bankruptcy/credit-counseling-and-debtor-education-courses">http://www.uscourts.gov/services-forms/bankruptcy/credit-counseling-and-debtor-education-courses</a>.

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/services-forms/bankruptcy/cre">http://www.uscourts.gov/services-forms/bankruptcy/cre</a> dit-counseling-and-debtor-education-courses.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### United States Bankruptcy Court Northern District of Ohio

In re	Shawne Nacole Mack		Case No.		
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPENSATI	ON OF ATTORN	NEY FOR DE	EBTOR(S)	
1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:				to me, for services rendered or to	
	For legal services, I have agreed to accept		\$	0.00	
	Prior to the filing of this statement I have received		\$	0.00	
	Balance Due		\$	0.00	
2. \$	<b>0.00</b> of the filing fee has been paid.				
3. T	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
4. T	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
5.	I have not agreed to share the above-disclosed compensation	with any other person un	less they are mem	bers and associates of my law firm	ı.
☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my leading to the agreement, together with a list of the names of the people sharing in the compensation is attached.					
6. I	n return for the above-disclosed fee, I have agreed to render lega	al service for all aspects o	f the bankruptcy c	ase, including:	
b c	<ul> <li>a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;</li> <li>b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;</li> <li>c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;</li> <li>d. [Other provisions as needed]</li> </ul>				
7. B	By agreement with the debtor(s), the above-disclosed fee does no Representation of debtor in adversarial proceed of property, including tax refund and tax stimular Representation of Debtor in Motion to Redeem Representation of Debtor in Motion to Avoid Ju-	dings and other conte us and Objection to E vehicle is additional f	sted matters, in xemptions. ee at the rate of	\$400 per Motion.	
	CERT	TIFICATION			
	certify that the foregoing is a complete statement of any agreem ankruptcy proceeding.	ent or arrangement for pa	yment to me for re	epresentation of the debtor(s) in	
Ju	ıly 1, 2021	/s/ Mary Lou Burns			
Dα	nte	Mary Lou Burns 00	71363		
		Signature of Attorney Mary Lou Burns, At	torney at Law		
		484 S. Miller Road			
		Akron,, OH 44333 330-668-6006 Fax:	330-869-9991		
		yourfreshstart@hot			
		Name of law firm			

### United States Bankruptcy Court Northern District of Ohio

In re	Shawne Nacole Mack		Case No.	
		Debtor(s)	Chapter	7
	VERIF			
The abo	ove-named Debtor hereby verifies that	at the attached list of creditors is true and co	orrect to the best	of his/her knowledge.
Date:	July 1, 2021	/s/ Shawne Nacole Mack		
		Shawne Nacole Mack		
		Signature of Debtor		

2nd Lock 360 Motor Pkwy #500 Hauppauge, NY 11788

Affirm, Inc. Attn: Bankruptcy Po Box 720 San Francisco, CA 94104

AfterPay US Services 600 California Street, 11th floor San Francisco, CA 94108

Ally Financial Attn: Bankruptcy Po Box 380901 Bloomington, MN 55438

Bridgecrest 7300 East Hampton Avenue Suite 100 Mesa, AZ 85209

Brite Financial Services Inc. Attn: Bankruptcy 101 West 14 Mile Road Madison Heights, MI 48071

Cleveland Clinic 4125 Medina Road Akron, OH 44333

Cleveland Hardwood Flooring 7926 Twin Oak Blvd.
Broadview Heights, OH 44147

Consumers Credit Union Attn: Bankruptcy 1075 Tri-State Parkway, #850 Gurnee, IL 60031

Credit One Bank Attn: Bankruptcy Department Po Box 98873 Las Vegas, NV 89193 Department of Education/Nelnet Attn: Bankruptcy Po Box 82561 Lincoln, NE 68501

DiCaudo, Pitchford & Yoder, LLC 209 South Main Street, Floor 3 Akron, OH 44308

Discover Financial Attn: Bankruptcy Po Box 3025 New Albany, OH 43054

Dr. Scott Anwerder 460 White Pond Drive #100 Akron, OH 44333

Eryan E. Mack 361 S. Miller Road Akron, OH 44333

Family Practice of Fairlawn 50 N. Miller Road Fairlawn, OH 44333

First Federal Bank 24700 Chagrin Blvd. #25 Beachwood, OH 44122

Frontier Communication Attn: Bankruptcy 19 John St. Middletown, NY 10940

Klarna Bank 629 N. High Street Columbus, OH

OneMain Financial Attn: Bankruptcy Po Box 3251 Evansville, IN 47731 PennyMac Loan Services, LLC Attn: Correspondence Unit Po Box 514387 Los Angeles, CA 90051

Reproductive Gynecology 95 Arch Street, #250 Akron, OH 44304

Resurgent Capital Services P.O. Box 10587 Greenville, SC 29603

Summa Health System 525 E. Market Street P. O. Box 3540 Akron, OH 44309-3540

Synchrony Bank Attn: Bankruptcy Dept Po Box 965060 Orlando, FL 32896

Synchrony Bank/Amazon Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Synchrony Bank/Gap Attn: Bankruptcy Dept Po Box 965060 Orlando, FL 32896

Synchrony Bank/Sams Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Synchrony Bank/TJX Attn: Bankruptcy Po Box 965064 Orlando, FL 32896 Synchrony/Ashley Furniture Homestore Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Target c/o Financial & Retail Services Mailstop BT PO Box 9475 Minneapolis, MN 55440

Thomas Michael Jr. & Associates Crystal M. Duplay 1000 Cliff Mine Road Suite 330 Pittsburgh, PA 15275

University Hospitals of Cleveland P. O. Box 94564 Cleveland, OH 44101

US Bank National Association 5065 Wooster Road Cincinnati, OH 45226